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**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLICATION IS A CIP OF PCT/GB00/01439 04/26/1999 , Yes; T.P.  
AND CLAIMS BENEFIT OF 60/135,106 04/27/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
UNITED KINGDOM 9909615.8 04/27/1999  
Yes, T.P.

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* 05/11/2001**      **\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Wesley</u> Examiner's Signature Initials	<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 6
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**ADDRESS**  
Brobeck, Phleger & Harrison LLP  
12390 El Camino Real  
San Diego, CA 92130

**TITLE**  
Exception handling method and apparatus for use in program code conversion

<b>FILING FEE RECEIVED</b> 475	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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